,								189/805047					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number  1341-1889 JAH  291 805, 047					
	T		S FILED - PART I (Column 1) (C					SMALL TYPE	ENTITY	OR		R THAN ENTITY	
TOTAL CLAIMS			2	7				RATE	FEE	٦	RATE	FEE	
FOR			NUMBER FILED		NUM	NUMBER EXTRA		BASIC F	EE 355.0	OF	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			27 minus 20=		· 7			X\$ 9=		OR		126. 2	
INDEPENDENT CLAIMS			6 minus 3 =		. 3			X40=	╁	7	- Vaa	,	
M	ULTIPLE DEPE	NDENT CLAIM P	PRESENT							-IOR	AOUS	240.2	
- 1	the difference	in column 1 is	less than zero, enter " in coi			miuma 2	,	+135=		OR	+270=	0	
* If the difference in column 1 is less than zero, enter "0" in column 2  CLAIMS AS AMENDED - PART II								TOTAL	· L	OR	. TOTAL	1076.	
_	8-1-05	(Column 1)		(Column 2) (Column 3)				SMALL	.ENTITY	OR	OTHER SMALL	THAN ENTITY	
AMENDMENT A		REMAINING AFTER AMENOMENT		NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAI FEE	]	RATE	ADDI- TIONAL FEE	
Ş	Total	. 25	Minus	<u> </u>	-7_			X\$ 9=		OR	X\$18=		
AME	independent	6	Minus	•••	6		ı	X40=		OR	X80=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 105	1-	1			
								+135=		OR	+270=		
(Column 1) (Column 2) (Column 3)										JOR	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST ER USLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 25	Minus	. 2	7	•//		X\$ 9=		OR	X\$18=		
	Independent FIRST PRESE	NTATION OF MU	Minus	PENDENT	CI AIM	=/		X40=		OR	X80=		
	Best Available Copy									OR	+270=		
										OR	TOTAL ADDIT. FEE	·	
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
		REMAINING AFTER AMENDMENT		PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	••		=	Γ	X\$ 9=		OR	X\$18=		
	Independent		Minus	***	1	2	1	X40=			X80=		
THIST PRESERVATION OF MULTIPLE DEPENDENT CLAIM										OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
!!	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.												

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